

Message Text

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11

ACTION EA-14

INFO OCT-01 EUR-25 NEA-14 ISO-00 SSO-00 NSCE-00 CIAE-00

PM-07 H-03 INR-11 L-03 NSAE-00 NSC-07 PA-04 RSC-01

PRS-01 SP-03 SS-20 USIA-15 OMB-01 MED-03 M-02 A-01

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FM AMEMBASSY VIENTIANE

TO SECSTATE WASHDC PRIORITY 9975

INFO AMEMBASSY BANGKOK

AMEMBASSY BEIRUT

AMEMBASSY MANILA

AMEMBASSY PARIS

AMEMBASSY PHNOM PENH

AMEMBASSY SAIGON

CINCPAC

USSAG

DIA

13 AF

C O N F I D E N T I A L VIENTIANE 5535

E.O. 11652: GDS

TAGS: PFOR, LA

SUBJECT: PRIME MINISTER SOUVANNA PHOUMA

REF: VIENTIANE 5498

1. SOUVANNA SPENT A RESTFUL NIGHT JULY 14 AND HIS CONDITION REMAINED STABLE THROUGHOUT THE DAY OF JULY 15. A MEDICAL CONFERENCE CONVENED AT 2100 HOURS, FOLLOWING THE ARRIVAL OF THE FRENCH AND RUSSIAN TEAMS AND AFTER EACH TEAM HAD AN OPPORTUNITY TO EXAMINE THE PRIME MINISTER. FOLLOWING BRIEF INTRODUCTORY REMARKS BY BOTH THE MINISTER OF HEALTH AND PRINCE MANGKHALA (THE PRIME MINISTER'S SON), THE SENIOR LAO PHYSICIAN REVIEWED THE CASE FOR THE BENEFIT OF PRINCE SOUPHANOUVONG AND THE
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APPROXIMATELY 13 ATTENDING PHYSICIANS. THE FRENCH AND THE RUSSIAN

TEAMS THEN REVIEWED FOR THE GROUP THEIR INDIVIDUAL OPINIONS. THERE WAS GENERAL AGREEMENT AS TO THE GRAVITY OF THE SITUATION ALTHOUGH THERE WAS SOME DIFFERENCE OF OPINION AS TO POSSIBLE MEANS OF TREATMENT. AT THE CONCLUSION OF THE MEETING, ONLY MINOR CHANGES IN TREATMENT WERE RECOMMENDED. THE LAO HAVING DECIDED NOT TO MAKE A PUBLIC STATEMENT ABOUT THE PRIME MINISTER'S ILLNESS WERE DISTRESSED THAT THE BANGKOK PAPERS WERE PUBLISHING COMPLETE BUT INACCURATE ARTICLES ABOUT THE CASE.

2. U.S. DR. KLIKS' MEDICAL ASSESSMENT FOLLOWS: EXAMINATION OF THE PRIME MINISTER AT 0900, JULY 15, DISCLOSED MUCH IMPROVEMENT IN THE CHEST WITH ONLY SOME RALES AT THE LEFT BASE. BLOOD PRESSURE WAS 134/70, PULSE 98, TEMPERATURE 37.8 CENTIGRADE AND RESPIRATION 18. THE CARDIAC EXAMINATION WAS UNCHANGED. URINE OUTPUT DURING THE 8 HOURS FOLLOWING LASIX WAS 920 CC WITH A 24-HOUR TOTAL URINE OUTPUT BEING 1,200 CC. THE INPUT WAS ABOUT 1,560 CC OF ORAL AND IV COMBINED. LABORATORY STUDIES ARE AS FOLLOWS: BUN 23, CREATINE 1.8, SGOT 56 (180 YESTERDAY), AND POTASSIUM 3.9. THE URINE WAS NEGATIVE FOR SUGAR, ACETONE AND PROTEIN. THE LEE-WHITE CLOTTING TIME WAS 29 MINUTES. THE ELECTROCARDIOGRAM WAS ESSENTIALLY UNCHANGED SINCE THE PREVIOUS ONE AT 1800 HOURS ON JULY 14. MEDICATIONS WERE CONTINUED AS PREVIOUSLY. IT WAS DECIDED TO ENCOURAGE ORAL INTAKE SO THAT THE TOTAL INPUT IN 24 HOURS WOULD BE ABOUT 2,000 CC'S.

3. AT THE FIRST MEETING WHICH THE NEWLY-ARRIVED FRENCH AND SOVIET MEDICAL TEAMS ATTENDED, IT WAS APPARENT THAT THE SOVIET APPROACH DIFFERED FROM THAT OF THE AMERICAN/FRENCH/LAO/THAI TEAMS.

4. BOTH THE FRENCH AND THE RUSSIAN GROUPS AGREED THAT THE PRIME MINISTER HAD SUFFERED A MASSIVE MI WHICH HAS APPARENTLY EVOLVED IN SEVERAL STAGES, THE DIFFICULTY BEING IN INTERPRETING THE MORE RECENT CHANGES ON THE ELECTROCARDIOGRAM AND WHETHER THEY ACTUALLY REPRESENT FURTHER DAMAGE. ALSO THERE WAS CONCERN ABOUT LEFT VENTRICULAR FAILURE AND WHETHER THE PERSISTENT RALES, COUGH, AND FEVER WERE PRIMARILY RELATED TO LEFT VENTRICULAR FAILURE OR BRONCHITIS AND/OR PNEUMONITIS. THE FRENCH SUGGESTED DECREASING THE HEPARIN DOSE AND FOLLOWING UP THE COAGULATION STUDIES, AND THAT MORE POTASSIUM REPLACEMENT AND DIURETIC THERAPY WOULD BE CONFIDENTIAL

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NECESSARY. THEY FELT THAT THE PRIME MINISTER'S DIABETES NEEDED NO PARTICULAR THERAPY AT THIS POINT. DR. KLIKS CONCURRED WITH THE POINTS RAISED BY THE FRENCH.

5. THE RUSSIANS AGREED THAT THE BASIC TREATMENT PLAN OF HEPARIN DIURETIC THERAPY AND ANTIBIOTICS BE CONTINUED. THEY, HOWEVER, RAISED THE QUESTION AS TO WHETHER A STRONGER ANTIBIOTIC WAS NECESSARY FOR THE PULMONARY PROBLEMS "IN SPITE OF THE PRIME

MINISTER'S ADVANCED AGE." THEY ALSO SUGGESTED THAT IT BE GIVEN INTRAMUSCULARLY WHICH THE FRENCH AND DR. KLIKS STRONGLY OPPOSED BECAUSE OF THE ANTI-COAGULANT THERAPY. THEY ALSO RAISED THE QUESTION OF TREATING THE PRIME MINISTER WITH INSULIN AS WELL AS BEGINNING A CARDIAC GLYCOSIDE (GITALIN). THESE RECOMMENDATIONS WERE AGAIN OPPOSED BY DR. KLIKS AND THE FRENCH BECAUSE SOUVANNA'S DIABETIC CONDITION AND DEGREE OF HEART FAILURE WERE NOT YET SEVERE ENOUGH TO WARRANT THESE DRAMATIC MEASURES.

6. THERE WAS SOME OTHER DISCUSSION ON MINOR POINTS OF THERAPY WHICH INDICATED TO DR. KLIKS THAT THE FRENCH, THE THAI, AND HE WERE TAKING THE SAME APPROACH TO MANAGING THE CASE.

7. THE DOCTORS WILL ALL MEET AT 1100 LOCAL, JULY 16, FOR A FURTHER REVIEW OF THE PRIME MINISTER'S CONDITION.
WHITEHOUSE

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